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**Date:** 8 October 2003

**To:** Examiner Victor S. Chang  
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**Subject:** USSN 09/736,548  
Our Ref.: tesa AG 685-HCL

**From:** Howard C. Lee

**Comments:** Filing of: response to Office Action dated 8 July 2003, including Amendment under 37 CFR § 1.116 (5 pgs.), Notice of Appeal (in duplicate), Transmittal Form (in duplicate)

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PTO/SB/21 (05-03)  
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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/736,548
	Filing Date	13 December 2000
	First Named Inventor	Schumann
	Art Unit	1771
	Examiner Name	Victor S. Chang
Total Number of Pages in This Submission	Attorney Docket Number	101769-90

ENCLOSURES <i>(check all that apply)</i>		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; text-align: center; margin-top: 10px;"> <b>RECEIVED</b>  <b>CENTRAL FAX CENTER</b>  <b>OCT 08</b> </div>
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Norris, McLaughlin & Marcus Howard C. Lee	
Signature	<i>Howard C. Lee</i>	
Date	8 October 2003	

CERTIFICATE OF TRANSMISSION/MAILING			
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